PTO/SB/123 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Patent Number 6.978.246

CHANGE OF

I am the:

Signature Typed or

CORRESPONDENCE ADDRESS	Issue Date	12/20/05			
Patent	Application Number	09/556,303			
Address to:	Filing Date	4/24/00			
Mail Stop Post Issue Commissioner for Patents P.O. Box 1450	First Named Inventor	Ruvolo			
Alexandria, VA 22313-1450	Attorney Docket Number	AM9-99-0134			
Please change the Correspondence Address for the above-identified patent to: The address associated with Customer Number: OR Firm or Individual Name					
City	State	ZIP			
Country					
Telephone	Email				
This form cannot be used to change the data assoc existing Customer Number use "Request for Custor					

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

	Patentee.	
	Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
\mathbf{X}	Attorney or agent of record. Registration Number 34368	

/randvwlacasse/

/ped o	or Name	Randy W. Lacasse		
ate	1/26/07		Telephone (703) 838-7683	
TE. C	Cionaturee o	fall the inventore or segionage of record of the entire intere	set or their representative/s) are required. Submit mult	tinla

if more than one signature is required, see below*. forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 38 U.S. 1.22 and 37 CFR 1.11 and 1.14. This collection is estimated to lake 3 minutes to complete including gathering, proparing, and substraining the completed application from to the USPTO. Then will very depending upon the individual cases, Any comments on the amount of their you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient 7 accompany to the Chief Information Officer, U.S. Patient V.A. 223/1-14(6). ON ON TSEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.